Missouri Department of Mental Health
Division of Alcohol and Drug Abuse

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Mark Stringer
Division Director

Pregnant Women and Substance Abuse Treatment

Women who abuse substances during pregnancy put not only their health and well-being at risk, but also that of their unborn children. The use of alcohol and drugs can produce a wide range of short– and long-term adverse health effects in the developing fetus. The Division of Alcohol and Drug Abuse (ADA), considers pregnant, substance-abusing women to be one of the highest priority populations in need of treatment services. To best meet their needs, as well as, women with children in their care, ADA developed a specialized treatment model known as Women and Children's Comprehensive Substance Treatment and Rehabilitation (CSTAR) programs[1]. These programs offer multiple levels of care that vary in the frequency and intensity of services and include a wide array of services at each level allowing for individualized treatment. These programs address therapeutic issues relevant to women's and children's specific needs and emphasize a family systems model of treatment. Additionally, as living situations are often unstable or are not conducive to recovery, most Women and Children's CSTAR programs offer residential support. Many programs also have transitional housing programs which can help support women in recovery while they attempt to find safe, permanent housing[1].

Primary Treatment Services[1]:

- ☑ Individual Counseling
- ☑ Family Therapy
- ☑ Group Counseling
- ☑ Group Education
- ☑ Community Support
- ☑ Trauma Counseling Services
- ☑ Co-Occurring Disorder Services
- ☑ Medication Services

Dependent Treatment and Other Services[1]:

- ☑ Individual Counseling
- ☑ Group Counseling
- ☑ Community Support
- ☑ Daycare

Common Topics for Group Education

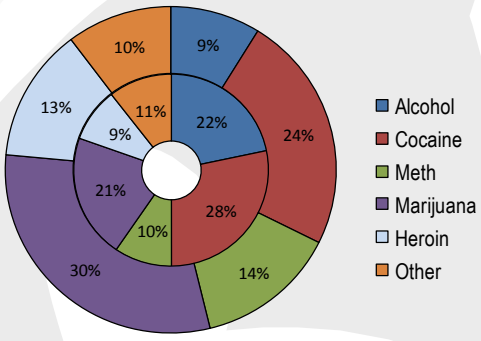
Coping with Trauma
Drug Education
Positive Self-Image
Anger Management
Relapse Prevention
Communication Skills

Admissions to W&C CSTAR Programs from 7/1/07 to 6/30/08[2]:

5117 Women admitted to W&C CSTAR Programs; 340 of those were pregnant at admission

Primary Drug at Admission

Outer Circle: W&C CSTAR Admissions;
Inner Circle: Pregnant At Admission



Pregnant at Admission to W&C CSTAR:

- ☑ Frequency of Use
  - ☒ 21% Daily
  - ☒ 32% Weekly
  - ☒ 17% Less than Weekly
  - ☒ 30% Less than Monthly
- ☑ Method of Use
  - ☒ 59% Smoking
  - ☒ 18% Oral
  - ☒ 14% IV
  - ☒ 9% Inhalation
- ☑ Referral Source
  - ☒ 46% Crim. Justice
  - ☒ 31% Self/Family/Friend
  - ☒ 9% Health/MH
  - ☒ 14% Other
- ☑ Region of Residence
  - ☒ 39% Eastern
  - ☒ 19% Northwest
  - ☒ 16% Southwest
  - ☒ 14% Central
  - ☒ 13% Southeast

W&C CSTAR Treatment Outcomes for 7/1/07 to 6/30/08:

Average length of stay[2]: 54.31 days

- ☑ 89 out of 97 babies were born drug free to women in Women and Children CSTAR programs.[3]
- ☑ Children's Division returned 110 children to their mother's custody.[3]

Mean Frequency of Use[2]:
Admission: 10.94 days per month
Discharge: 2.90 days per month.

Sources:

1. Certification Standards for Alcohol and Drug Abuse Programs, 9 CSR 30-3.190 Specialized Programs for Women and Children, Missouri Department of Mental Health Division of Alcohol and Drug Abuse, November 30, 2007.
2. Missouri Department of Mental Health, Division of Alcohol and Drug Abuse, As reported from Consumer Information Management, Outcomes and Reporting System, 2008.
3. Missouri Department of Mental Health, Division of Alcohol and Drug Abuse, Infants Born and Children Returned to Mothers Report. Reported by ADA CSTAR W&C Contracted Providers. Monthly. 2008.

For more information please contact the Division of Alcohol and Drug Abuse at (573)751-4942 or email: adamail@dmh.mo.gov